REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 9-4-97 2 Serial/Patent # 08/809856					
3 Please refund the following fee(s):		4 PAPER NUMBER		5 DATE FILED	6 AMOUNT
X	Filing			6-16-97	\$ 488.00
	Amendment				\$
	Extension of Time				\$
	Notice of Appeal/Appeal				\$
	Petition				\$
	Issue				\$
	Cert of Correction/Terminal Disc.		•		\$
	Maintenance				\$
	Assignment				\$
	Other				\$
		7 TOTAL AMOUNT OF REFUND			\$ 488.00
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
X	Overpayment	X	_ c	redit Dep	osit A/C #:
	Duplicate Payment		9 2	3 0	804
ļ	No Fee Due (Explanation):	<u></u>			
of Filing Free					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: BERTHA TUANS TITLE: LES					
SIGNATURE: Seith 1. home: 308-8275					
OFFICE: ************************************					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: Long W. O. Harry DATE: 5 Lept ?'					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B